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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   Fo	or Other Than	An Authorized	d Committe	ee		
1 NAME OF T	YPE OR PRINT	7	ample: If tagin	ug type		Office Use Only
NAME OF T     COMMITTEE (in full)	TPE ON PHINI		ample: If typin er the lines.	ig, type	12FE4M5	
American Optometric As	ssociation Po	olitical Action	Committe	e 		
					<u> </u>	
ADDRESS (number and street)	1505 Prince Stre	et				
Check if different than previously reported. (ACC)	Suite 300 Alexandria				VA L	22314
2. FEC IDENTIFICATION NUM	MBER ▼	CITY ▲		S	STATE A	ZIP CODE ▲
C C00024968		3. IS THIS REPORT	V	IEW N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) un 20 (M6)	-	20 (M8) Nov 20 (M11) (Non-Election Year Only)  Nov 20 (M11) (Non-Election Year Only)
April 15		Apr 20 (M4)	J	ul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
Quarterly Report (Q1  July 15	(C) 12-Day		Primary (12P)	)	General (	12G) Runoff (12R)
Quarterly Report (Q2 October 15	Report	for the:	Convention (1	12C)	Special (	12S)
Quarterly Report (Q3  January 31  Year-End Report (YE		Election on	M M /	D D /	Y   Y   Y   Y   Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		Election for the:	General (30G	i)	Runoff (3	OR) Special (30S)
Termination Report (TER)		Election on	M = M /	D = D /	Y   Y   Y   Y	in the State of
5. Covering Period 04	01	2016	through	04	30	2016
I certify that I have examined this	Report and to the	ne best of my kno	wledge and b	elief it is true	e, correct and	complete.
Type or Print Name of Treasurer	Fred Dubrick O.I	D.				
Signature of Treasurer Fred D	ubrick O.D.		[Electronically	<i>Filed]</i> Da	ate 05	/ 11 / 2016
NOTE: Submission of false, erroned	ous, or incomplete	information may su	ubject the pers	on signing th	is Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### American Optometric Association Political Action Committee

Report Covering the Period: From: 04 01 2016 To: 04 30 2016

		COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6.	(a) Cash on Hand  January 1,  2016		474007.69				
	(b) Cash on Hand at Beginning of Reporting Period	403960.27					
	(c) Total Receipts (from Line 19)	75765.30	287624.31				
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	479725.57	761632.00				
7.	Total Disbursements (from Line 31)	34804.09	316710.52				
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	444921.48	444921.48				
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00					
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00					

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### American Optometric Association Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	59287.52	190581.06
(ii) Unitemized	16440.69	96941.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	75728.21	287522.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	75728.21	287522.35
Totals to Line 33, page 5)	13120.21	201022.00
. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
7 III 20ano 11000170a	7	
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	7 7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	7 7	7 7 7
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	3.00	0.00
(Dividends, Interest, etc.)	37.09	101.96
Transfers from Non-Federal and Levin Funds	31.09	101.90
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(non concado no)	0.00	0.00
(b) Levin Founda (for a Octobal 1 117)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(5) 15.61 1141151515 (4664 15(4) 4114 15(5))	7	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	75765.30	287624.31
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	75765.30	287624.31

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Operating Expenditures: —         <ul> <li>(a) Allocated Federal/Non-Federal</li> </ul> </li> </ol>		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	2204.00	61060 55
Expenditures(c) Total Operating Expenditures	3304.09	61960.52
(add 21(a)(i), (a)(ii), and (b))▶	3304.09	61960.52
2. Transfers to Affiliated/Other Party	200	0.00
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	31500.00	254500.00
. Independent Expenditures		
(use Schedule E)	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use scriedule 1)	7	0.00
. Loan Repayments Made	0.00	0.00
	0.00	0.00
7. Loans Made	0.00	5.55
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
i i		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(0.000 0.000)	7	
(d) Total Contribution Refunds	0.00	
(add Lines 28(a), (b), and (c))▶	0.00	250.00
Other Disbursements	0.00	0.00
_	7	
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
	200	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Dishursements (add Lines 21/a) 22		
. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	34804.09	316710.52
, , , , , , , , , , , , , , , , , , , ,	34004.03	0.0710.02
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	34904.00	040740.50
from Line 31)	34804.09	316710.52

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	75728.21	287522.35
4. Total Contribution Refunds (from Line 28(d))	0.00	250.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75728.21	287272.35
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3304.09	61960.52
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	3304.09	61960.52

FOR LINE NUMBER: PAGE 6 OF 74 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Paul C Ajamian Date of Receipt Mailing Address 245 Shadowbrook Dr. 04 01 2016 City State Zip Code Transaction ID: 39318033 GA Roswell 30075-4600 Amount of Each Receipt this Period FEC ID number of contributing 138.89 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 888.89 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Matthew E Esperon Date of Receipt Mailing Address 392 Kinderkamack Rd 04 01 2016 City State Zip Code Transaction ID: 39318035 NJ Hillsdale 07642-1643 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Kimberly Jones Date of Receipt Mailing Address 14450 NE 29th Place 04 01 2016 Ste. 115 City Zip Code State Transaction ID: 39318039 WA Bellevue 98007-3697 Amount of Each Receipt this Period FEC ID number of contributing С 51.00 federal political committee. Memo Item Name of Employer Occupation **Executive Director** Optometric Physicians of Washington Receipt For: Aggregate Year-to-Date ▼ Primary General 204.00 Other (specify) 289.89 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: (check only one) PAGE 7 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and or for commercial purposes, other than using the		nerson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associat	tion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Rebecca H Wartman  Mailing Address 46 Lambeth Walk  City Fairview  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code NC 28730-7721  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  400.00	Date of Receipt  O4 01 2016  Transaction ID: 39318097  Amount of Each Receipt this Period  100.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Gregory A Caldwell  Mailing Address 225 Terrace Dr  City Lilly  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary Other (specify)   General	State Zip Code PA 15938-5819  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.01	Date of Receipt  O4 01 2016  Transaction ID: 39318213  Amount of Each Receipt this Period  166.67  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Jeffrey J Neighbors  Mailing Address 1420 255th St  City Eagle Grove  FEC ID number of contributing federal political committee.  Name of Employer Self Employed Receipt For:  Primary General Other (specify)	State Zip Code IA 50533-8110  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / 01 2016  Transaction ID: 39318958  Amount of Each Receipt this Period  500.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		766.67
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s) (check only one)

11	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) American Optometric Association	n Political Action Committee	
<b>A.</b>	Full Name (Last, First, Middle Initial) Dr. Ronald Lee Hopping  Mailing Address 1801 Creekside Dr  City Friendswood  FEC ID number of contributing federal political committee.  Name of Employer Self Employed Receipt For: Primary General	State Zip Code TX 77546-7821  C  Occupation  Doctor of Optometry,MPH  Aggregate Year-to-Date ▼	Date of Receipt  04 02 2016  Transaction ID: 39319084  Amount of Each Receipt this Period  71.43  Memo Item
В.	Full Name (Last, First, Middle Initial)  Dr. Desiree Tyer Hopping  Mailing Address 1801 Creekside Dr  City Friendswood  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify) ▼	State Zip Code TX 77546-7821  C  Occupation Doctor of Optometry  Aggregate Year-to-Date   214.28	Date of Receipt  04 02 2016  Transaction ID: 39319085  Amount of Each Receipt this Period  35.72  Memo Item
C.	Full Name (Last, First, Middle Initial)  Dr. Paul H Cook JR  Mailing Address PO Box 2700  City Frisco  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code CO 80443-2700  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  480.00	Date of Receipt  04 02 2016  Transaction ID: 39319089  Amount of Each Receipt this Period  120.00  Memo Item
S	UBTOTAL of Receipts This Page (optional)		227.15
Т	OTAL This Period (last page this line number or	nly)	·

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and or for commercial purposes, other than using the		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associat	ion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Dan Hock  Mailing Address 600 Eagle Nest Trl  City  Evergreen  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  Other (specify)   Ell Name (Last, First, Middle Initial)	State Zip Code CO 80439-4242  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  320.00	Date of Receipt  04 02 2016  Transaction ID: 39319090  Amount of Each Receipt this Period  80.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Lynn A Davis  Mailing Address 6546 Jacal Ct NW  City Albuquerque  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code NM 87114-6120  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  666.68	Date of Receipt  04 03 2016  Transaction ID: 39319095  Amount of Each Receipt this Period  166.67  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Timothy J La Freniere  Mailing Address 12715 Gordon Blvd Apt 113  City  Woodbridge  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22192-2652  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  04 03 2016  Transaction ID: 39319108  Amount of Each Receipt this Period  500.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		746.67
TOTAL This Period (last page this line numbe	r only)	·

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Use separate schedule(s) for each category of the	(ch	(check only one)									
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, 3		13		14		15		16		17	

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associati	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Courtney M Shay  Mailing Address 12715 Gordon Blvd Apt 113  City  Woodbridge	State Zip Code VA 22192-2652	Date of Receipt    M M
FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	Occupation Doctor of Optometry  Aggregate Year-to-Date   500.00	500.00 Memo Item
Full Name (Last, First, Middle Initial)  Dr. Scott M Burks  Mailing Address PO Box 1351		Date of Receipt  04  04  04  04  04
City Buffalo  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MO 65622-1351  C Occupation	Transaction ID : 39319111  Amount of Each Receipt this Period  95.00  Memo Item
Self Employed  Receipt For:  Primary General  Other (specify) ▼	Doctor of Optometry  Aggregate Year-to-Date ▼  440.00	
Full Name (Last, First, Middle Initial)  Dr. Martin H Carroll  Mailing Address 3700 Essex Rd  City	State Zip Code	Date of Receipt  04 04 2016  Transaction ID: 39319112
Cheyenne  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  □ Primary □ General □ Other (specify) ▼	WY 82001-1641  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  800.00	Amount of Each Receipt this Period  200.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	795.00
TOTAL This Period (last page this line number	only)	

	F	OR	LINE	PAGE		11	OF		74			
Use separate schedule(s) for each category of the	(0	(check only one)										
Detailed Summary Page		X	11a		11b		11c		12			
			13		14		15		16			17

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Heather L Trapheagen Date of Receipt Mailing Address 1722 SE 2nd St 04 05 2016 City Zip Code State Transaction ID: 39331888 FL Cape Coral 33990-5303 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Donald W Furman Date of Receipt Mailing Address 2101 310th Street 04 05 2016 City State Zip Code **Transaction ID: 39331891** IΑ Forest City 50436-8029 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 333.32 Full Name (Last, First, Middle Initial) c. Ms Renee Brauns Date of Receipt Mailing Address 12792 Bennington Common Lane 04 06 2016 City Zip Code State Transaction ID: 39332938 MO Saint Louis 63146-2562 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation American Optometric Association Associate Executive Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 683.33 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOF	PAGE	1	12 OF	:	74				
Use separate schedule(s) for each category of the	(che	ck only	or or	ne)						
Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Mark D Esarey Date of Receipt Mailing Address 1680 State Highway 130 04 06 2016 City State Zip Code Transaction ID: 39332939 61920-6752 Charleston IL Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Elizabeth Anderson Steele Date of Receipt Mailing Address 5812 Carrington Lake Pkwy 04 06 2016 City State Zip Code Transaction ID: 39332943 AL Trussville 35173-2890 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Dr. Gregory S Wolfe Date of Receipt Mailing Address 21 Mina Ave Apt 207 06 2016 04 City Zip Code State Transaction ID: 39337837 TN Memphis 38103-6411 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 475.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	F	OR	LINE	NU	MBER	PAGE	•	13 OI	=	74	
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Detailed Summary Page		X	11a		11b		11c		12		
., .,			13		14		15		16		17

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associat	ion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Hilaire A Pressley  Mailing Address 4596 Treto Ave		Date of Receipt
City Las Vegas	State Zip Code NV 89141-4283	04 07 2016  Transaction ID: 39346994  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00 Memo Item
Name of Employer  Self Employed  Receipt For:  Primary General  Other (specify) ▼	Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  340.00	
Full Name (Last, First, Middle Initial)  3. Dr. Kathleen E Powell  Mailing Address 9710 Copper Dr		Date of Receipt  04  07  2016
City Anchorage	State Zip Code AK 99507-1226	Transaction ID : 39346995  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	85.00 Memo Item
Self Employed  Receipt For:	Doctor of Optometry  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	, 340.00	
Full Name (Last, First, Middle Initial)  Dr. David Heath  Mailing Address 311 LYNCROFT RD		Date of Receipt  04 07 2016
City NEW ROCHELLE	State Zip Code NY 10804-4122	Transaction ID : 39347007  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer  Self Employed  Receipt For:  Primary  General	Occupation Doctor of Optometry  Aggregate Year-to-Date ▼	- Memo Item
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	250.00	420.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 14 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pe name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Stanley Woo  Mailing Address 5190 Via Carretas  City Yorba Linda  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code CA 92886-4554  C  Occupation Doctor of Optometry,MBA  Aggregate Year-to-Date ▼  500.00	Date of Receipt  04 08 2016  Transaction ID: 39347530  Amount of Each Receipt this Period  250.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Jeri Ann Schneebeck  Mailing Address 10036 E Pinewood Dr  City Parker  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)   Other (specify)	State Zip Code CO 80138-7804  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  800.00	Date of Receipt  M M / DB / 2016  Transaction ID: 39347531  Amount of Each Receipt this Period  200.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Zachary B Steele  Mailing Address 5812 Carrington Lake Pkwy  City Trussville  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code AL 35173-2890  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  640.00	Date of Receipt  04 08 2016  Transaction ID: 39347532  Amount of Each Receipt this Period  160.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	610.00
TOTAL This Period (last page this line number	only)	

	FO	R LINE	NU	IMBER	:	PAGE	•	15 OF	74
Use separate schedule(s)	(ch	eck only	or	ne)					
for each category of the Detailed Summary Page	>	11a		11b		11c		12	
,g.		13		14		15		16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. James E Deom Date of Receipt Mailing Address 448 E County Rd 04 08 2016 City State Zip Code Transaction ID: 39347534 PΑ Drums 18222-1618 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jill Geering Matheson Date of Receipt Mailing Address 1603 Beach Dr 04 80 2016 City State Zip Code Transaction ID: 39347541 AK Douglas 99824-5200 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Dr. Suzette Marie Place Date of Receipt Mailing Address 1525 Utah St 2016 04 07 City Zip Code State Transaction ID: 39347550 CO Golden 80401-2742 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Optometric Association	n Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Grant W Jones  Mailing Address 2117 Grandview Dr.  City  Torrington  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  Other (specify)   Entity Jones (Last, First, Middle Initial)	State Zip Code WY 82240-2638  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  365.00	Date of Receipt  O4 07 2016  Transaction ID: 39347885  Amount of Each Receipt this Period  365.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Lynda L Jones  Mailing Address 2117 Grandview Dr.  City Torrington  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify) ▼	State Zip Code WY 82240-2638  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  04 07 2016  Transaction ID: 39347886  Amount of Each Receipt this Period  1000.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Eric K Botts  Mailing Address 1338 Woodland Trl  City  Macomb  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code IL 61455-3507  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  04 09 2016  Transaction ID: 39348591  Amount of Each Receipt this Period  250.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		1615.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. John D Coble Date of Receipt Mailing Address 1501 Sunset Hill Dr 04 09 2016 City State Zip Code Transaction ID: 39348594 TX Rockwall 75087-3216 Amount of Each Receipt this Period FEC ID number of contributing C 166.67 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 666.68 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jacqueline M Bowen Date of Receipt Mailing Address 3930 W 19th Street Ln 04 10 2016 City State Zip Code Transaction ID: 39348611 CO Greeley 80634-3446 Amount of Each Receipt this Period FEC ID number of contributing 181.82 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 545.46 Full Name (Last, First, Middle Initial) c. Dr. Tyler A Lee Date of Receipt Mailing Address 219 Island Dr 2016 04 01 City State Zip Code Transaction ID: 39348805 NF Doniphan 68832-1714 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 20.00 Other (specify) 368.49 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Optometric Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Tyler A Lee  Mailing Address 219 Island Dr  City  Doniphan  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code NE 68832-1714  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  40.00	Date of Receipt  O4 01 2016  Transaction ID: 39348806  Amount of Each Receipt this Period  20.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Tyler A Lee  Mailing Address 219 Island Dr  City  Doniphan  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code NE 68832-1714  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  220.00	Date of Receipt  04 01 2016  Transaction ID: 39348807  Amount of Each Receipt this Period  180.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Bruce F Breckenridge  Mailing Address 16921 SE Stoneybrook Ct  City Clackamas  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  Other (specify)	State Zip Code OR 97015-6701  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  240.00	Date of Receipt  O4 11 2016  Transaction ID: 39348958  Amount of Each Receipt this Period  60.00  Memo Item
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Robert M Theaker Date of Receipt Mailing Address 12 Wyndemere Vale 04 2016 City State Zip Code Transaction ID: 39351073 CA 93940-5811 Monterey Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Karen M Heaston Helms Date of Receipt Mailing Address 5103 Santa Fe Ln 04 2016 City State Zip Code Transaction ID: 39351074 WA 99301-8248 Pasco Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** 

Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Barbara L Horn  Mailing Address 61269 Coralburst Dr		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Washington	State Zip Code MI 48094-1746	Transaction ID : 39351347  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	165.29
Name of Employer	Occupation	Memo Item
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 661.16	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Mr. Jonathan F Hymes Date of Receipt Mailing Address 1505 Prince St 04 2016 City Zip Code State Transaction ID: 39351350 VA Alexandria 22314-2852 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation **Executive Director** American Optometric Association Receipt For: Aggregate Year-to-Date ▼ Primary General 666.68 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jason C Clopton Date of Receipt Mailing Address 959 River Bend Dr. 04 12 2016 City State Zip Code Transaction ID: 39351353 Cookeville TN 38506-5973 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation Self Employed Doctor of Optometry, FCOVD Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Dr. Christopher W Wroten Date of Receipt Mailing Address 25833 Royal Birkdale Dr 04 12 2016 City State Zip Code Transaction ID: 39351355 LA Denham Spgs 70726-6479 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) 335.01 SUBTOTAL of Receipts This Page (optional).....

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$\left. \right\rangle$	NAME OF COMMITTEE (In Full) American Optometric Association	n Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. James R Hale  Mailing Address 2616 SW Brooklane Dr		Date of Receipt
			04 12 2016
	City	State Zip Code	Transaction ID: 39351359
	Corvallis	OR 97333-1500	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2000.00
	Name of Employer	Occupation	Memo Item
	Self Employed	Doctor of Optometry	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	
В.	Full Name (Last, First, Middle Initial)  Dr. David P Nelson		Date of Receipt
	Mailing Address 5714 Oxbow Bnd		04 12 2016
	City	State Zip Code	Transaction ID: 39352073
	Madison	WI 53716-2472	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer	Occupation	Memo Item
	Self Employed Receipt For:	Doctor of Optometry	
	Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  400.00	
C.	Full Name (Last, First, Middle Initial) Dr. David Robert Frazee		Date of Receipt
•	Mailing Address 4962 Shoreline Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 39352080
	Frisco	TX 75034-4058	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer	Occupation	Memo Item
	Self Employed	Doctor of Optometry	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General  Other (specify) ▼	800.00	
s	SUBTOTAL of Receipts This Page (optional)		2600.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. D. Cory Rath Date of Receipt Mailing Address 10748 Sprucedale Ave 04 2016 City Zip Code State Transaction ID: 39352084 NV Las Vegas 89144-4401 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Audie M Teague Jr. Date of Receipt Mailing Address 105 Friar Tuck Ln 04 13 2016 City State Zip Code Transaction ID: 39352085 AR Prescott 71857-2608 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Dr. Timothy A Stafford Date of Receipt Mailing Address 1012 Julius Richardson Rd 2016 04 14 City Zip Code State Transaction ID: 39355406 SC Irmo 29063-9740 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Michelle Wika Chaney Date of Receipt Mailing Address 3614 Coneflower Dr 04 2016 City State Zip Code Transaction ID: 39355407 CO Fort Collins 80521-7542 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 830.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jeffrey C Anderson Date of Receipt Mailing Address 205 Story St 14 04 2016 City State Zip Code Transaction ID: 39355408 IΑ Boone 50036-4242 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Dr. Callie L Enyart Date of Receipt Mailing Address 700 Glenway St 2016 04 14 City Zip Code State Transaction ID: 39355410 WI Madison 53711-1722 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Ian Benjamin Gaddie Date of Receipt Mailing Address 4001 Fox Meadow Way 04 2016 15 City State Zip Code Transaction ID: 39357645 KY 40059-9115 Prospect Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Craig S Rock Date of Receipt Mailing Address 913 N Woodlawn Ave 04 15 2016 City State Zip Code Transaction ID: 39357646 IΑ Lake City 51449-1261 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 365.00 Full Name (Last, First, Middle Initial) c. Dr. Douglas Curtis Clark Date of Receipt Mailing Address 2530 Woodfern Cir 2016 04 15 City State Zip Code Transaction ID: 39360008 AL Birmingham 35244-6405 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) 1615.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Jeffrey Scot Hackleman Date of Receipt Mailing Address 1190 Southwind Dr 04 2016 15 City State Zip Code Transaction ID: 39360538 GA Bishop 30621-1366 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Trevor J Cleveland Date of Receipt Mailing Address 3726 Robbie St 04 16 2016 City State Zip Code Transaction ID: 39360601 OR Eugene 97404-1996 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 586.00 Full Name (Last, First, Middle Initial) c. Dr. Margaret M Read Date of Receipt Mailing Address 5484 Midship Ct 2016 04 16 City Zip Code State Transaction ID: 39360604 Burke VA 22015-1932 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. H. Lindsay Wright Date of Receipt Mailing Address 798 Trail Ridge Dr 04 2016 16 City State Zip Code Transaction ID: 39360610 CO Louisville 80027-3113 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation Armed Forces Optometric Society **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Sue E Lowe Date of Receipt Mailing Address 1704 Skyline Rd 04 16 2016 City State Zip Code Transaction ID: 39360613 WY 82070-8932 Laramie Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 666.68 Full Name (Last, First, Middle Initial) c. Dr. Gary James Avallone Date of Receipt Mailing Address 144 Fox Run 2016 04 16 City Zip Code State Transaction ID: 39360614 West Monroe LA 71291-8137 Amount of Each Receipt this Period FEC ID number of contributing C 166.67 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 666.68 Other (specify)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Ian M Jones Date of Receipt Mailing Address 32 Deer Hill Ln 04 2016 City Zip Code State Transaction ID: 39360671 ME Hampden 04444-3400 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. William R Burges Date of Receipt Mailing Address 405 Paris St 17 2016 04 City State Zip Code Transaction ID: 39360672 TX Castroville 78009-4511 Amount of Each Receipt this Period FEC ID number of contributing 100.91 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 392.74 Full Name (Last, First, Middle Initial) c. Dr. Brian J Plattner Date of Receipt Mailing Address 917 S Market St 2016 04 17 City State Zip Code Transaction ID: 39360674 IL Knoxville 61448-1299 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) 285.91 SUBTOTAL of Receipts This Page (optional).....

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		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Optometric Associat	tion Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Kathleen Elaine Goff  Mailing Address 114 Crested Peak Ct  City Santa Teresa  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code NM 88008-9423  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  333.36	Date of Receipt  O4 18 2016  Transaction ID: 39360712  Amount of Each Receipt this Period  83.34  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Randy L Hertneky  Mailing Address 333 S Ivy St  City  Yuma  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code CO 80759-2313  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  O4 18 2016  Transaction ID: 39360731  Amount of Each Receipt this Period  500.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Thomas Allen Dunn  Mailing Address PO Box 712  City Troy  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code AL 36081-0712  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  04 18 2016  Transaction ID: 39360748  Amount of Each Receipt this Period  500.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		1083.34
TOTAL This Period (last page this line number	er only)	<b>&gt;</b>

	FOF	FOR LINE NUMBER:						31 OF	=	74
Use separate schedule(s) for each category of the	(che	ck only	or	ne)						
Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Brian W Wadman Date of Receipt Mailing Address 100 Meadow Ln 04 18 2016 City Zip Code State Transaction ID: 39360953 01301-9764 Greenfield MA Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Michelle Levin Date of Receipt Mailing Address 1039 Creekford Drive 04 18 2016 City State Zip Code Transaction ID: 39360959 FL Weston 33326-2859 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Dr. Karon Klem Nowakowski Date of Receipt Mailing Address 2411 N County Road 500 W 2016 04 18 City State Zip Code Transaction ID: 39360967 IN Muncie 47304-9528 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: (check only one) PAGE 32 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Optometric Associati	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Michael K Smith  Mailing Address 1239 Goggin Ln  City  Danville  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code KY 40422-9366  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Dr. Viola Kanevsky  Mailing Address 119 W 71st St  City  New York  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code NY 10023-3876  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Date of Receipt  04 18 2016  Transaction ID: 39360999  Amount of Each Receipt this Period  250.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Peter Jeffery Shoji  Mailing Address 1910 Puu Nanea Pl  City Honolulu  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code HI 96822-1776  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  O4 18 2016  Transaction ID: 39361085  Amount of Each Receipt this Period  500.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	only)	

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TEMIZED RECEIPTS	for each category of the  Detailed Summary Page	(check only one) 
	d Statements may not be sold or used by any pe the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Optometric Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Susan M Brunnett  Mailing Address 9940 Ashleigh Way  City Highlands Ranch  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code CO 80126-4244  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  666.68	Date of Receipt  04 19 2016  Transaction ID: 39361135  Amount of Each Receipt this Period  166.67  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Fred Farias III  Mailing Address 1308 S Cynthia St  City  McAllen  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78501-1114  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Dr. Steven Alan Miller  Mailing Address 35228 La Flora Dr  City Yucaipa  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code CA 92399-5120  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional	) <b>&gt;</b>	916.67
TOTAL This Period (last page this line numl	per only)	

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for each category of the Detailed Summary Page	X 11a 11b 11c 12	
	13 14 15 16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Larry D Sumner Date of Receipt Mailing Address 8116 E Harvard Cir 04 2016 City State Zip Code Transaction ID: 39361195 CO Denver 80231-7619 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Tricia Marie Brenner Date of Receipt Mailing Address 9688 E Maplewood Cir 14 04 2016 City State Zip Code Transaction ID: 39361196 CO Greenwood Vlg 80111-7016 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Dr. Nicholas A Radetzky Date of Receipt Mailing Address 88 Piermont Rd 2016 04 14 City Zip Code State Transaction ID: 39361197 NJ Norwood 07648-2318 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Stacey Wenger Bowling Date of Receipt Mailing Address 190 Whitetail Dr 04 2016 City Zip Code State **Transaction ID: 39361212** MO Walnut Shade 65771-8127 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Lynn Smith Hammonds Date of Receipt Mailing Address 2725 Smyer Rd 04 20 2016 City State Zip Code Transaction ID: 39379027 AL Vestavia 35216-1026 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 666.68 Full Name (Last, First, Middle Initial) c. Dr. Paul Bryan Stauder Date of Receipt Mailing Address 1765 County Road 725 N 20 2016 04 City State Zip Code Transaction ID: 39379033 IL Fairfield 62837-4324 Amount of Each Receipt this Period FEC ID number of contributing C 39.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 228.00 Other (specify) 455.67 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 36 OF 74 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Optometric Associa	ation Politica	I Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Randolph E Brooks  Mailing Address 3 Schindler Dr  City Succasunna  FEC ID number of contributing federal political committee.	Date of Receipt  04 21 2016  Transaction ID: 39383268  Amount of Each Receipt this Period  200.00		
Name of Employer  Self Employed  Receipt For:  Primary General  Other (specify)	Occupation Doctor of Op Aggregate Y	otometry Year-to-Date ▼ 800.00	Memo Item
Full Name (Last, First, Middle Initial)  Dr. Martha Morrow  Mailing Address 1895 Highway 28  City Red Bay  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify)	State AL  C  Occupation Doctor of Op  Aggregate Y	Zip Code 35582-3447  stometry  Year-to-Date ▼  2000,00	Date of Receipt  04 21 2016  Transaction ID: 39383374  Amount of Each Receipt this Period  2000.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. James Maxwell Ernst  Mailing Address 14 Bittersweet Dr  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State KY  C  Occupation Doctor of Op  Aggregate Y	Zip Code 41001-1300  otometry  Year-to-Date ▼  1000.00	Date of Receipt  04 22 2016  Transaction ID: 39385613  Amount of Each Receipt this Period  500.00  Memo Item
SUBTOTAL of Receipts This Page (optional)			2700.00
TOTAL This Period (last page this line numb	er only)		

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Amanda A Wood Date of Receipt Mailing Address 12170 J Ave 04 2016 22 City Zip Code State Transaction ID: 39385617 50126-8808 Iowa Falls IΑ Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Dawn Marie Miller Date of Receipt Mailing Address 3004 E Lake Hill Dr 04 22 2016 City State Zip Code Transaction ID: 39385619 CA Orange 92867-1910 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Dr. Jon Frederick Pederson Date of Receipt Mailing Address 1025 Milwaukee St 04 22 2016 City Zip Code State Transaction ID: 39385620 CO Denver 80206-3337 Amount of Each Receipt this Period FEC ID number of contributing С 85.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) 410.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. James W Wadley Date of Receipt Mailing Address 1349 Canterbury Dr 04 2016 22 City State Zip Code Transaction ID: 39385621 79602-4260 TX Abilene Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Sarah K Ito Date of Receipt Mailing Address 1940 Marino Ter 04 07 2016 City State Zip Code Transaction ID: 39385722 San Marino CA 91108-1628 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 C.

Full Name (Last, First, Middle Initial) Dr. Donovan L Crouch		Date of Receipt
Mailing Address 701 Winthrop Cir		04 22 _2016 _
City	State Zip Code	Transaction ID : 39385956
Storm Lake	IA 50588-2747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	Memo Item
Self Employed	Doctor of Optometry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Donald T Shute Date of Receipt Mailing Address 809 N 49th Ct 04 2016 22 City Zip Code State Transaction ID: 39385988 WA 98908-2517 Yakima Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Rebecca St Jean Date of Receipt Mailing Address 9 Carriage Rd 04 22 2016 City State Zip Code Transaction ID: 39385990 Charleston WV 25314-2158 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr. David M Coulson Date of Receipt Mailing Address 3116 E Meadowbrook Ave 2016 04 22 City Zip Code State Transaction ID: 39385994 ΑZ Phoenix 85016-5060 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Optometric Associat	ion Politica	al Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Richard W Phillips  Mailing Address 105 BeechBrook Court  City Unicoi  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State TN  C  Occupation Doctor of O  Aggregate		Date of Receipt  04 23 2016  Transaction ID: 39386670  Amount of Each Receipt this Period  125.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Ted A McElroy  Mailing Address 2812 Ridge Ave N  City Tifton  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify)	State GA  C Occupation Doctor of Op Aggregate		Date of Receipt  04 23 2016  Transaction ID: 39386677  Amount of Each Receipt this Period  166.67  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Stacey J Meier  Mailing Address 604 E Yearling Rd  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State AZ  C  Occupation Doctor of O  Aggregate		Date of Receipt  O4
SUBTOTAL of Receipts This Page (optional)			2291.67
TOTAL This Period (last page this line number	r only)	<b>&gt;</b>	

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	X   11a
	r information copied from such Reports and St or commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)  American Optometric Associatio	n Politica	al Action Committee	
A	Full Name (Last, First, Middle Initial)  Dr. Todd R Smith  Mailing Address 441 E Hale St  City  Mesa  FEC ID number of contributing rederal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State AZ  C  Occupation Doctor of O Aggregate		Date of Receipt  O4 24 2016  Transaction ID: 39386689  Amount of Each Receipt this Period  1000.00  Memo Item
B	Full Name (Last, First, Middle Initial) Dr. Lincoln Joseph Daynes  Mailing Address 2737 Brewer Dr  City Sierra Vista  FEC ID number of contributing rederal political committee.  Name of Employer Self Employed  Receipt For:  Primary  General  Other (specify)	State AZ  C  Occupation Doctor of O  Aggregate		Date of Receipt  04 24 2016  Transaction ID: 39386691  Amount of Each Receipt this Period  1000.00  Memo Item
C. [	Full Name (Last, First, Middle Initial) Dr. Deanna Swafford Alexander  Mailing Address 4127 Cedargate Dr  City Fort Collins FEC ID number of contributing dederal political committee.  Name of Employer  Self Employed Receipt For:  Primary General Other (specify)	State CO  C  Occupation Doctor of O  Aggregate		Date of Receipt  04 24 2016  Transaction ID: 39386695  Amount of Each Receipt this Period  150.00  Memo Item
SL	JBTOTAL of Receipts This Page (optional)			2150.00
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Detailed Summary Page	X 11a 11b	11c 12							
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Douglas Curtis Clark Date of Receipt Mailing Address 2530 Woodfern Cir 04 24 2016 City State Zip Code Transaction ID: 39386696 Birmingham AL 35244-6405 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Dori M Carlson Date of Receipt Mailing Address PO Box O 2016 04 24 City State Zip Code Transaction ID: 39386700 ND Park River 58270-0714 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 666.68 Full Name (Last, First, Middle Initial) c. Dr. Rebecca A Dobbins Date of Receipt Mailing Address 301 W 11th St 2016 04 24 City Zip Code State Transaction ID: 39386705 KS Coffeyville 67337-5904 Amount of Each Receipt this Period FEC ID number of contributing С 125.00 federal political committee. Memo Item Name of Employer Occupation

391.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

250.00

**Doctor of Optometry** 

Aggregate Year-to-Date ▼

Self Employed Receipt For:

Primary

Other (specify)

General

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or for	commercial purposes, other than using the		by person for the purpose of soliciting contributions littee to solicit contributions from such committee.
\	ME OF COMMITTEE (In Full)  nerican Optometric Association	n Political Action Committee	
A. Dr Mai City We FEC fede Nan Self Rec	est Palm Bch  C ID number of contributing eral political committee.  The of Employer  Employed  Teipt For:  Primary  General  Other (specify)	State Zip Code FL 33402-2375  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  400.00	Date of Receipt  04 24 2016  Transaction ID: 39386708  Amount of Each Receipt this Period  100.00  Memo Item
City Enc fede Nan Self		State Zip Code CA 91436-3620  C  Occupation  Doctor of Optometry  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  O4 25 2016  Transaction ID: 39386716  Amount of Each Receipt this Period  500.00  Memo Item
C. Di Mai City Lal FEC fede Nan	Name (Last, First, Middle Initial)  r. Ashley K McFerron  ling Address 19302 Riverwood Ln  Re Oswego  C ID number of contributing eral political committee.  ne of Employer  f Employed  reipt For:  Primary General  Other (specify)	State Zip Code OR 97035-1318  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt    M
SUBT	OTAL of Receipts This Page (optional)		▶ 850.00
тота	L This Period (last page this line number o	nly)	•

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for each category of the Detailed Summary Page		X	11a		11b		11c		12		
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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Jeffrey A Gonnason Date of Receipt Mailing Address 6721 Gloucester Pl 04 25 2016 City State Zip Code Transaction ID: 39386725 ΑK Anchorage 99504-3343 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 336.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Brandon L. Smith Date of Receipt Mailing Address 2660 Allen St 04 25 2016 City State Zip Code Transaction ID: 39386726 KS Salina 67401-7626 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Dr. Steven K Brownmiller Date of Receipt Mailing Address 1004 Ridge Rd 2016 04 25 City State Zip Code Transaction ID: 39386728 IA Denison 51442-1124 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General

250.00

Other (specify)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) American Optometric Association	Political Action Committee	
Name of Employer  Self Employed  Receipt For:  Primary  Other (specify) ▼  Other (specify) ▼	State Zip Code MI 48813-2131  C Deccupation Octor of Optometry Aggregate Year-to-Date   333.36	Date of Receipt  04 25 2016  Transaction ID: 39386729  Amount of Each Receipt this Period  83.34  Memo Item
Name of Employer C Self Employed D	State Zip Code NY 10583-7708  Cocupation octor of Optometry aggregate Year-to-Date  250.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer C Self Employed D	State Zip Code WA 98275-3654  C Decupation Coctor of Optometry Coggregate Year-to-Date ▼  250.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)		583.34

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Optometric Association Political Action Committee

/	,		
١.	Full Name (Last, First, Middle Initial)  Ms. Kathi Williams  Mailing Address 15044 Ulster Way		Date of Receipt
	City Thornton  FEC ID number of contributing federal political committee.  Name of Employer  Colorado Optometric Association  Receipt For:  Primary General  Other (specify)   Other	State Zip Code CO 80602-7500  C  Occupation Executive Director  Aggregate Year-to-Date ▼  500.00	7 Transaction ID : 39386937  Amount of Each Receipt this Period  500.00  Memo Item
3.	Full Name (Last, First, Middle Initial)  Dr. Craig G Hoover  Mailing Address 7343 Covington Home PI		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Culpeper  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)   Other	State Zip Code VA 22701-9708  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Transaction ID : 39386948  Amount of Each Receipt this Period  250.00  Memo Item
Э.	Full Name (Last, First, Middle Initial)  Dr. John D Kiernan  Mailing Address 2241 Seneca Way  City Sioux City  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)   Other (specify)	State Zip Code IA 51104-1523  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Date of Receipt  04 22 2016  Transaction ID: 39386950  Amount of Each Receipt this Period  250.00  Memo Item
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	1000.00
T	OTAL This Period (last page this line number o	nlv)	

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Robert H Sharp  Mailing Address 1008 E 22nd St  City Atlantic  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code IA 50022-2866  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Date of Receipt  O4 22 2016  Transaction ID: 39386951  Amount of Each Receipt this Period  250.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Abie R Chadderdon  Mailing Address 2005 Timberline Rd  City  Marshalltown  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  Other (specify)	State Zip Code IA 50158-3865  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  2000.00	Date of Receipt  04 22 2016  Transaction ID: 39386952  Amount of Each Receipt this Period  2000.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Wing C Hsieh  Mailing Address 4014 Country Club Blvd  City Sioux City  FEC ID number of contributing federal political committee.  Name of Employer Self Employed Receipt For:  Primary General Other (specify)	State Zip Code IA 51104-1306  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  500.00	Date of Receipt  04
SUBTOTAL of Receipts This Page (optional)		2750.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Kelly J Norland Date of Receipt Mailing Address 25626 Oak Ln 04 2016 22 City State Zip Code Transaction ID: 39386954 Spirit Lake IΑ 51360-6843 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. James D Sandefur Date of Receipt Mailing Address 219 Blue Bush Rd 04 22 2016 City State Zip Code Transaction ID: 39386956 LA Oakdale 71463-4911 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Daniel R Perala Date of Receipt Mailing Address 2827 Whitetail Rd 2016 04 22 City Zip Code State Transaction ID: 39386957 WY Cheyenne 82009-1424 Amount of Each Receipt this Period FEC ID number of contributing С 1500.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page	X	11a		11b		11c	12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Robert Neil Christen II Date of Receipt Mailing Address 112 Beechwood Dr 04 25 2016 City Zip Code State Transaction ID: 39388915 WV New Martinsville 26155-9400 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jeffrey S Pelson Date of Receipt Mailing Address 2202 SE Linden Ln 04 26 2016 City State Zip Code Transaction ID: 39393587 OR **Grants Pass** 97527-5293 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Dr. Michael Ernest Heil Date of Receipt Mailing Address 25904 210th Ave SE 2016 04 26 City Zip Code State Transaction ID: 39393590 WA Maple Valley 98038-7530 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 2200.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Llea caparata cabadula(c)		FOR LINE NUMBER: PAGE 51 OF										
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NAME OF COMMITTEE (In Full)	* *	
American Optometric Associat	ion Political Action Committee	
Full Name (Last, First, Middle Initial)  1. Dr. Ronald Lee Benner  Mailing Address 1408 F Mandand Lee		Date of Receipt
Mailing Address 1408 E Maryland Ln		04 26 _ 2016 _
City	State Zip Code	Transaction ID : 39393592
Laurel	MT 59044-2238	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	166.67
Name of Employer	Occupation	Memo Item
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 666.68	
Full Name (Last, First, Middle Initial)  3. Dr. Steven Thomas Reed  Mailing Address 4550 Simpson Highway 28 V	V	Date of Receipt
City	State Zip Code	04 26 2016 Transaction ID : 39393594
Magee	MS 39111-5187	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	166.67
Name of Employer Self Employed	Occupation  Doctor of Optometry	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 666.68	
Full Name (Last, First, Middle Initial)  Dr. Dennis M Brtva		Date of Receipt
Mailing Address 57 Pebblebrook Ct		04 26 2016
City Bloomington	State Zip Code IL 61705-6300	Transaction ID : 39393596  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	Memo Item
Self Employed	Doctor of Optometry	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 686.38	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	533.34
TOTAL This Pariod (last page this line number	r only)	

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. James Travis Yadon Date of Receipt Mailing Address 2109 Avian Way 04 25 2016 City Zip Code State Transaction ID: 39393630 OK 73170-3436 Oklahoma City Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. David W Wineland Date of Receipt Mailing Address 8400 Concord Rd 04 25 2016 City State Zip Code Transaction ID: 39393632 OH Johnstown 43031-8154 Amount of Each Receipt this Period FEC ID number of contributing 127.25 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 509.00 Full Name (Last, First, Middle Initial) c. Dr. G. Kevin Kasovich Date of Receipt Mailing Address 212 Grand Lakes Dr 04 26 2016 City State Zip Code Transaction ID: 39394471 LA Thibodaux 70301-1612 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed

877.25 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

500.00

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Optometric Associa	ation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. MaryJane Healey Mailing Address 6710 124th PI SE  City Snohomish  FEC ID number of contributing federal political committee.  Name of Employer Self Employed Receipt For: Primary General	State WA  C Occupation Doctor of C Aggregate		Date of Receipt  04 27 2016  Transaction ID: 39394626  Amount of Each Receipt this Period  200.00  Memo Item
Other (specify) ▼		800.00	
Full Name (Last, First, Middle Initial)  B. Dr. Jeffrey William Jones  Mailing Address 107 Northcastle St			Date of Receipt  04 27 2016
City Longview  FEC ID number of contributing federal political committee.	State TX	Zip Code 75604-3544	Transaction ID : 39394630  Amount of Each Receipt this Period  100.00
Name of Employer Self Employed Receipt For:	Occupation Doctor of O		Memo Item
Primary General Other (specify) ▼	Aggregate	400.00	
Full Name (Last, First, Middle Initial)  Dr. David S Hays  Mailing Address 8720 52nd Street Ct W			Date of Receipt  O4 27 2016
City University Place	State WA	Zip Code 98467-1758	Transaction ID : 39394633  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer  Self Employed  Receipt For:  Primary General  Other (specify) ▼	Occupation Doctor of C Aggregate		Memo Item
SUBTOTAL of Receipts This Page (optional)			384.00
TOTAL This Period (last page this line numb	per only)		

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Optometric Associatio	n Political Action Committee	
Full Name (Last, First, Middle Initial)  Dr. Stevin Robert Minie  Mailing Address 17601 San Fernando Mission E  City Granada Hills  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code CA 91344-4038  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  1340.00	Date of Receipt  04 27 2016  Transaction ID: 39394635  Amount of Each Receipt this Period  85.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Dwight Matthew Burchett  Mailing Address 1231 Parkview Way  City Richmond  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)	State Zip Code KY 40475-3436  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  333.36	Date of Receipt  04 28 2016  Transaction ID: 39395604  Amount of Each Receipt this Period  83.34  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Glenda B Brown  Mailing Address 4392 Grove Field Court  City Suwanee  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code GA 30024-6758  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  321.00	Date of Receipt  04 28 2016  Transaction ID: 39395606  Amount of Each Receipt this Period  97.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	265.34
TOTAL This Period (last page this line number of	only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Zoey K Loomis Date of Receipt Mailing Address 3750 Highway 144 04 2016 28 City State Zip Code Transaction ID: 39395608 CO Weldona 80653-9107 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Andrea P Thau Date of Receipt Mailing Address 145 E 84th St Apt 11A 04 28 2016 City State Zip Code Transaction ID: 39395612 NY New York 10028-2058 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 666.68 Full Name (Last, First, Middle Initial) c. Dr. Carey A Patrick Date of Receipt Mailing Address 970 Patrician Ct 2016 04 28 City Zip Code State Transaction ID: 39395617 TX Fairview 75069-8781 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 350.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page		X	11a		11b		11c	12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Rockatonia Batts Date of Receipt Mailing Address 285 Bockman Rd 04 2016 28 City State Zip Code Transaction ID: 39395620 KY Fulton 42041-6537 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Mira B Swiecicki Date of Receipt Mailing Address 664 Clark Rd 04 28 2016 City State Zip Code Transaction ID: 39395621 WA Bellingham 98225-7842 Amount of Each Receipt this Period FEC ID number of contributing 167.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 668,00 Full Name (Last, First, Middle Initial) c. Dr. Richard C Edlow Date of Receipt Mailing Address 8913 Griffin Way 2016 04 28 City Zip Code State Transaction ID: 39395629 MD **Baltimore** 21208-1424 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 617.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Christine W Cook Date of Receipt Mailing Address 511 Shadow Brooke Dr. 04 2016 28 City Zip Code State Transaction ID: 39395639 VA Chesapeake 23320-3511 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Diane E Reddin Date of Receipt Mailing Address PO Box 66 04 28 2016 City State Zip Code Transaction ID: 39395640 CO Crawford 81415-0066 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Dr. Jan L Cooper Date of Receipt Mailing Address 101 Chandler W 04 28 2016 City State Zip Code Transaction ID: 39395645 CA Highland 92346-5482 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Chris R Fields Date of Receipt Mailing Address 410 Miracle Mile Suite 13 04 2016 28 City State Zip Code Transaction ID: 39395646 NH 03766-2639 Lebanon Amount of Each Receipt this Period FEC ID number of contributing 167.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 668.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Benjamin D Crawford Date of Receipt Mailing Address 1840 Kuskokwim St 28 04 2016 City State Zip Code Transaction ID: 39395647 AK 99508-3230 Anchorage Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Dr. Ladd M Nolin Date of Receipt Mailing Address 12101 Woodway Cir 2016 04 28 City State Zip Code Transaction ID: 39395648 AK Anchorage 99516-2059 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼

500.00

Primary

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

517.00

FOR LINE NUMBER: PAGE 61 OF 74 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Teresa L Carlson Date of Receipt Mailing Address 6607 S Forest Way Unit D 04 2016 28 City Zip Code State Transaction ID: 39395649 CO Centennial 80121-3566 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Michael Leslie Weeden Date of Receipt Mailing Address 3201 Gaines Rd 04 28 2016 City State Zip Code Transaction ID: 39395650 MS Corinth 38834-8422 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 800.00 Full Name (Last, First, Middle Initial) c. Dr. Kevin L Gee Date of Receipt Mailing Address 9119 Highway 6 Ste 200 04 28 2016 City Zip Code State Transaction ID: 39395667 TX Missouri City 77459-4876 Amount of Each Receipt this Period FEC ID number of contributing С 166.67 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 666.68 Other (specify) 516.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	F	DR	LINE	NU	<b>MBER</b>	:	PAGE	. (	52 OF	74
Use separate schedule(s)	(с	he	ck only	or	ne)					
for each category of the Detailed Summary Page		X	11a		11b		11c		12	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Dirk Schrotenboer Date of Receipt Mailing Address 10729 Deer Ridge Ct 04 2016 28 City State Zip Code Transaction ID: 39395669 Zeeland MI 49464-6830 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jennifer L Deakins Date of Receipt Mailing Address 2819 N Fitzhugh Ave Apt 1254 28 04 2016 City State Zip Code Transaction ID: 39395670 Dallas TX 75204-3175 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300,00 Full Name (Last, First, Middle Initial) **c.** Dr. Jeff A Hayden Date of Receipt Mailing Address 679 Plumtree Ln 2016 04 28 City State Zip Code Transaction ID: 39395673 MI Fenton 48430-4207 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

	F	FOR LINE NUMBER: PAGE 63 OF										
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Detailed Summary Page		X	11a		11b		11c		12			
			13		14		15		16			17

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Jennifer L Planitz Date of Receipt Mailing Address 3537 Newcastle Dr SE 04 2016 28 City Zip Code State Transaction ID: 39395676 NM Rio Rancho 87124-3672 Amount of Each Receipt this Period FEC ID number of contributing C 416.66 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 1666.64 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Angela K Darveaux Date of Receipt Mailing Address 938 Aspen Valley Dr 04 28 2016 City State Zip Code Transaction ID: 39395678 WI Onalaska 54650-8220 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375,00 Full Name (Last, First, Middle Initial) c. Dr. Peter H Kehoe Date of Receipt Mailing Address 521 N Soangetaha Rd 2016 04 28 City State Zip Code Transaction ID: 39395688 IL Galesburg 61401-5588 Amount of Each Receipt this Period FEC ID number of contributing C 175.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 716.66 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	F	FOR LINE NUMBER: PAGE 64 OF									74
Use separate schedule(s) for each category of the	(0	(check only one)									
Detailed Summary Page		X	11a		11b		11c		12		
, 3			13		14		15		16		17

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Christopher L Eddy Date of Receipt Mailing Address 6306 Buchanan St 04 2016 28 City State Zip Code Transaction ID: 39395692 CO 80525-5810 Fort Collins Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 336.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Brenden R White Date of Receipt Mailing Address 864 E Ranch Cir 04 28 2016 City State Zip Code Transaction ID: 39395697 UT Draper 84020-9011 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Dr. Michael R Flandro Date of Receipt Mailing Address 4944 Mohawk PI 04 26 2016 City Zip Code State Transaction ID: 39395733 ID Pocatello 83204-4534 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation **Doctor of Optometry** Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 684.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 65 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports are or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Optometric Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael C Noble  Mailing Address 5609 W Arlington St  City Yakima  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code WA 98908-4297  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  2016.00	Date of Receipt  04 26 2016  Transaction ID: 39395734  Amount of Each Receipt this Period  2016.00  Memo Item
Full Name (Last, First, Middle Initial)  B. Dr. Megan A Sullivan  Mailing Address 616 W 2nd St  City Alta  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code IA 51002-1012  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  400.00	Date of Receipt  04 28 2016  Transaction ID: 39418499  Amount of Each Receipt this Period  400.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Craig Donovan Crouch  Mailing Address 100 Grand Ave  City Storm Lake  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code IA 50588-1607  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  400.00	Date of Receipt  04 28 2016  Transaction ID: 39418500  Amount of Each Receipt this Period  400.00  Memo Item
SUBTOTAL of Receipts This Page (optional	)	2816.00
TOTAL This Period (last page this line numl	per only)	

	F	FOR LINE NUMBER: PAGE 66 OF 74								74		
Use separate schedule(s) for each category of the	(0	(check only one)										
Detailed Summary Page		X	11a		11b		11c		12			
			13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Optometric Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Fred R DeHaan Date of Receipt Mailing Address 3110 Leona Dr 04 2016 28 City State Zip Code Transaction ID: 39418501 Storm Lake IΑ 50588-2751 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Katherine F Coffey Date of Receipt Mailing Address 580 Quarry St Unit 15 28 04 2016 City State Zip Code Transaction ID: 39418511 MA Quincy 02169-1582 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Self Employed **Doctor of Optometry** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Ms Adrianne M. Drollette Date of Receipt Mailing Address P.O. Box 1206 30 2016 04 City Zip Code State Transaction ID: 39440809 NC Wilson 27894-1206 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation **Executive Director** The North Carolina State Optometric So Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 67 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Optometric Association	on Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Zachary S McCarty  Mailing Address 6303 Deep Canyon Rd  City Hixson  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code TN 37343-2674  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M J 30 2016  Transaction ID: 39440815  Amount of Each Receipt this Period  250.00  Memo Item
Full Name (Last, First, Middle Initial)  Dr. Samuel K Hoffmann  Mailing Address 13 Meadow Ln  City Sheridan  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code WY 82801-9700  C  Occupation Doctor of Optometry  Aggregate Year-to-Date ▼  365,00	Date of Receipt  04 29 2016  Transaction ID: 39443534  Amount of Each Receipt this Period  365.00  Memo Item
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State Zip Code  C Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  Amount of Each Receipt this Period  Memo Item
SUBTOTAL of Receipts This Page (optional)	·····	615.00
TOTAL This Period (last page this line number	only)	59287.52

SCHEDULE B (FEC Form 3X)	11	aloda ( )	FOR LINE I	NUMBER:		PAGE	68 O	F 74
ITEMIZED DISBURSEMENTS	Use separate sched for each category of		(check only	one)				
	Detailed Summary		X 21b	22	23	24	25	26
	,		27	28a	28b	28c	29	30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
\	e and address of any	y political (	committee to	SOIICIT COITE	ibutions in	JIII SUCII C	ommitte	е.
NAME OF COMMITTEE (In Full)  American Optometric Association F	Political Action (	Commi	ttoo					
American Optometric Association F	Ollical Action (	Commi	liee					
Full Name (Last, First, Middle Initial)				5				
<b>A</b> . WellsFargo				Date of	Disburseme			
Mailing Address 1650 Tyson Blvd.				04	11		2016	
1000 1,0011 2.10.				4.	- :-			
	state Zip Code	е		Transa	ction ID : 3	9361211		
McLean Purpose of Disbursement	VA 22102			Tranoa	01.01.12.0			
Bank Fees			001	Amount	of Each Dis	sbursemer	nt this Po	eriod
Candidate Name			Category/					
			Type		7	7	914.80	)
Office Sought: House Disbursem				Mem	o ltem			
	,	neral		Bank Fee	s			
State: District:	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
B. Bank of America				Date of	Disburseme	ent		
Barik of Afficilita				M M	/ D D	/ Y	Y	Y
Mailing Address PO Box 790251				04	04	2	2016	
-								
,	state Zip Code MO 63179	e		Transa	ction ID : 3	9445057		
Purpose of Disbursement	00170							
Visa/Master Card Fees			001	Amount	of Each Dis	sbursemer	nt this Pe	eriod
Candidate Name			Category/				1770.28	8
Office Cought	ant Fam		Туре			7	1770.2	
Office Sought: House Disbursem		neral			o Item			
	Other (specify)	ilerai		Visa/Mas	ter Card Fe	es		
State: District:	(-							
Full Name (Last, First, Middle Initial)								
C. Bank of America				Date of	Disburseme	ent		
				M M	/ D D		Y	
Mailing Address PO Box 790251				04	05	2	2016	_
City	State Zip Code	e				0445055		
St. Louis	MO 63179			Transa	ction ID : 3	9445058		
Purpose of Disbursement American Express Fees								
Candidate Name		L	001	Amount	of Each Dis	sbursemer	t this P	eriod
Candidate Name			Category/ Type				464.23	3
Office Sought: House Disbursem	nent For:		1,400	Morr	o Item	- 7		
		neral			Express F	ees		
President	Other (specify)			American	Ехрісээ і ч	503		
State: District:								
							04.65.5	
SUBTOTAL of Disbursements This Page (optional)					7		3149.3	1
TOTAL This Period (last page this line number only)								
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page (check continuous)	1b 22 23 24 25 26
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  American Optometric Association F	ne and address of any political committee	
Full Name (Last, First, Middle Initial)  A. Bank of America  Mailing Address PO Box 790251		Date of Disbursement  O4 15 2016
City St. Louis Purpose of Disbursement	State Zip Code MO 63179	Transaction ID: 39445059
Bank Fees Candidate Name	001 Category/ Type	Amount of Each Disbursement this Period
Office Sought:  House Senate President State:  Disburser  Senate  Disburser	nent For:  Primary General  Other (specify)	Memo Item Bank Fees
Full Name (Last, First, Middle Initial)  B.		Date of Disbursement
Mailing Address  City	State Zip Code	
Purpose of Disbursement  Candidate Name	Category/ Type	Amount of Each Disbursement this Period
Office Sought:    House   Disbursen		Memo Item
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address  City S	State Zip Code	
Purpose of Disbursement  Candidate Name	Category/	Amount of Each Disbursement this Period
Candidate Name	Type	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 70 OF 74
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
And information could focus out Departs at 1011			
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	<b>)</b> [		
American Optometric Association	Political Action Comm	nittee	
·			
Full Name (Last, First, Middle Initial)			Date of Dichurcoment
A. Independent Action, Inc.			Date of Disbursement
Mailing Address 1619 13th Street NW			04 08 2016
City	State Zip Code		Transaction ID : 39347811
Washington Purpose of Disbursement	DC 20009		
Committee Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	2500.00
	ment For:		Memo Item
Senate	Primary General		Committee Contribution
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
3. Republican Party of Wisconsin			Date of Disbursement
Republicant arty of Wisconsill			M M / D D / Y Y Y Y
Mailing Address 148 E. Johnson Street			04 08 2016
City	State Zip Code WI 53703		Transaction ID: 39347814
Madison Purpose of Disbursement	vvi 53/03		
Committee Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	0500.00
		Type	2500.00
	ment For:		Memo Item
Senate President	Primary General  Other (specify) ▼		Committee Contribution
State: District:	Outer (Specify)		
Full Name (Last, First, Middle Initial)			
C. Families For James Lankford			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 1639			04 14 2016
City	State Zip Code		
City Bethany	State Zip Code OK 73008		Transaction ID: 39357170
Purpose of Disbursement			
Candidate Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Sen. James Lankford  Office Sought: House Disburse	ment For: 2016	Туре	
✓ Senate	Primary General		Memo Item
President	Other (specify)		Candidate Contribution
State: OK District:	<b>(1</b> - 2/ <b>∀</b>		
ı			
SUBTOTAL of Disbursements This Page (optional).			7500.00
TOTAL This Period (last page this line number only	)		

SCHEDULE B (FEC Form $3X$ )	Han assessed ask (1.4.4.)	FOR LINE N	IUMBER: PAGE 71 OF 74
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 27	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Any information copied from such Reports and Stateme	ente may not be sold or uses		
or for commercial purposes, other than using the name	e and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Optometric Association P	olitical Action Comm	nittee	
Full Name (Last, First, Middle Initial)			B (B)
A. LANK PAC			Date of Disbursement
Mailing Address PO Box 1639			04 14 2016
,	tate Zip Code		Transaction ID - 20057470
Bethany	OK 73008		Transaction ID: 39357172
Purpose of Disbursement Committee Contribution	1	011	Amount of Each Disbursement this Period
Candidate Name	-	Category/	2500.00
		Type	2500.00
Office Sought: House Disbursem			Memo Item
	Primary General		Committee Contribution
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			
Bill Shuster For Congress			Date of Disbursement
Moiling Address 20			M M / D D / Y Y Y Y Y
Mailing Address PO Box 27			04 14 2016
,	tate Zip Code PA 16648		Transaction ID: 39357175
Hollidaysburg Purpose of Disbursement	PA 16648		
Candidate Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. William Franklin Shuster		Type	1000.00
	ent For: 2016		Memo Item
	Primary General		Candidate Contribution
State: PA District: 09	Other (specify)		
Full Name (Last, First, Middle Initial)			
Guthrie For Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 9639			04 14 2016
City	tate Zip Code		Transaction ID - 20257470
Bowling Green	Y 42102		Transaction ID: 39357176
Purpose of Disbursement Candidate Contribution	1	011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Brett Guthrie		Type	4000.00
	ent For: 2016		Memo Item
	Primary General		Candidate Contribution
	Other (specify) ▼		
State: KY District: 02			
SUBTOTAL of Disbursements This Page (optional)			7500.00
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TOTAL This Period (last page this line number only)		_	

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  American Optometric Association F	e and address of any political	by any person committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Guthrie For Congress			Date of Disbursement
Mailing Address PO Box 9639			04 14 2016
Bowling Green	State Zip Code KY 42102		Transaction ID: 39357177
Senate	nent For: 2016 Primary	011 Category/ Type	Amount of Each Disbursement this Period  2500.00  Memo Item Candidate Contribution
Full Name (Last, First, Middle Initial)  Gory PAC, Inc.  Mailing Address 918 Pennsylvania Ave SE			Date of Disbursement  M - M / D - D / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Washington Purpose of Disbursement Committee Contribution  Candidate Name  Office Sought: House Disbursen Senate	nent For: Primary General	011 Category/ Type	Transaction ID: 39357178  Amount of Each Disbursement this Period  5000.00  Memo Item Committee Contribution
State: District:  Full Name (Last, First, Middle Initial)	Other (specify)		
Cory Booker For Senate  Mailing Address PO Box 32237			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Newark Purpose of Disbursement Candidate Contribution  Candidate Name  Cory Booker  Office Sought: House Disbursen  Senate	State Zip Code NJ 07102  nent For: 2020 Primary General Other (specify)	011 Category/ Type	Transaction ID : 39357179  Amount of Each Disbursement this Period  1000.00  Memo Item Candidate Contribution
SUBTOTAL of Disbursements This Page (optional)		······	8500.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)	Han announts out 11.40	FOR LINE	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	pents may not be sold or use		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	- · ·		
American Optometric Association F	Political Action Com	mittee 	
Full Name (Last, First, Middle Initial)			
Loudermilk For Congress			Date of Disbursement
Mailing Address PO Box 447			04 26 2016
	State Zip Code		Transaction ID : 39394186
Cassville Purpose of Disbursement	GA 30123		
Candidate Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Barry Loudermilk  Office Sought:  House Disbursem	ant Fore 2012	Туре	
Senate	nent For: 2016  Primary General  Other (specify)		Memo Item Candidate Contribution
State: GA District: 11	· 		
Full Name (Last, First, Middle Initial)			
Richard Burr Committee; The			Date of Disbursement
Mailing Address Post Office Box 5928			04 26 2016
Winston-Salem	State Zip Code NC 27113		Transaction ID: 39394207
Purpose of Disbursement Candidate Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Sen. Richard M. Burr		Type	1000.00
X Senate	nent For: 2016 Primary		Memo Item Candidate Contribution
State: NC District:			
Full Name (Last, First, Middle Initial)  Hudson For Congress			Date of Disbursement
riduson i or congress			M M / D D / Y Y Y Y
Mailing Address PO Box 5053			04 28 2016
City	State Zip Code		Transaction ID : 39396425
	NC 28027		กลาเรลงแบบ เป. 55550425
Purpose of Disbursement Candidate Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	100000
Rep. Richard Hudson Jr.		Туре	1000.00
Senate	nent For: 2016  Primary General  Other (specify)		Memo Item Candidate Contribution
State: NC District: 08	- \-i		
SUBTOTAL of Disbursements This Page (optional)			7000.00
		·····	
TOTAL This Period (last page this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	· · · · · · · · · · · · · · · · · · ·
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Optometric Association F	Political Action Comm	nittee	
Full Name (Last, First, Middle Initial)  A. Gary Palmer For Congress  Mailing Address 1919 Oxmoor Rd #235			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zin Code		20 2010
Homewood	State Zip Code AL 35209		Transaction ID: 39418824
Purpose of Disbursement Candidate Contribution  Candidate Name  Gary Palmer		011 Category/ Type	Amount of Each Disbursement this Period
Office Sought:    House   Disbursen	nent For: 2016  Primary General  Other (specify)	.,,,,	Memo Item Candidate Contribution
State: AL District: 06  Full Name (Last, First, Middle Initial)  3.			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
President	nent For: Primary General Other (specify)	71-	Memo Item
State: District:  Full Name (Last, First, Middle Initial)  C.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
City	State Zip Code		
Purpose of Disbursement			Amount of Fook Dishursers at this Body
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)		Memo Item
SUBTOTAL of Disbursements This Page (optional)			1000.00
TOTAL This Period (last page this line number only)		·····	31500.00